



State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

Annual Report for the year: 2017  
Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

1. Entity ID Number <u>U 8384</u>		2. Exact name of the Corporation <u>F E R Realty Corporation</u>			
3. Principal Office Address <u>216 Felucca Ave.</u>			City <u>Jamestown</u>	State <u>RI</u>	Zip <u>02835</u>
4. NAICS Code <u>53</u>		6. Brief description of the character of business conducted in Rhode Island			
5. State of Incorporation <u>Rhode Island</u>					
7. List ALL officers (names and addresses) <span style="float:right">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <u>Jennifer Jaswell</u>			Vice-President Name <u>Lisa GAZIN</u>		
Street Address <u>216 felucca Ave.</u>			Street Address <u>316 Maple Avenue</u>		
City <u>Jamestown</u>	State <u>RI</u>	Zip <u>02835</u>	City <u>Kennett Sq.</u>	State <u>Penn</u>	Zip <u>19348</u>
Secretary Name <u>Lisa GAZIN</u>			Treasurer Name <u>JENNIFER JASWELL</u>		
Street Address <u>316 Maple Avenue</u>			Street Address <u>216 felucca Ave.</u>		
City <u>Kennett Sq.</u>	State <u>Penn</u>	Zip <u>19348</u>	City <u>Jamestown</u>	State <u>RI</u>	Zip <u>02835</u>
8. List ALL directors (names and addresses) <span style="float:right">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized			10. Shares Issued <span style="float:right">Check the box to indicate an attachment <input type="checkbox"/></span>		
This information is currently of record in the Department of State. <u>1000 comm NO par value</u> Changes require an additional filing.			NUMBER OF SHARES		
			CLASS/SERIES		
			PAR VALUE		
			<u>183,33</u>		
			<u>0</u>		
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.					
<b>Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.</b>					
Name of Authorized Representative <u>JENNIFER JASWELL</u>					Date <u>3/16/2017</u>
Signature of Authorized Representative <u>Jennifer Jaswell</u>					

## MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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FILED

MAR 13 2017

BY

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